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**FACSIMILE TRANSMISSION COVER SHEET**

Date: August 5, 2005

To: United States Patent and Trademark Office  
Examiner: Ton, Dang T.; Art Unit: 2666

Fax: (571) 273-8300

Re: **Application Serial No.: 09/965,745**  
Filing Date: 9/28/2001; First-Named Inventor: Ryan  
Attorney Docket No.: 01CON237P

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 22

Message:

Enclosed please find the Amendment and Response to Non-Final Office Action dated July 11, 2005.

Thank you.

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AUG 05 2005

Attorney Docket No.: 01CON237P

**AMENDMENT COVER SHEET**

IN RE APPLICATION OF: Ryan, et al.

SERIAL NO.: 09/965,745 FILED: 9/28/2001

FOR: System And Method For Connecting Communication Devices Over Packet Networks

HONORABLE COMMISSIONER FOR PATENTS  
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☐ No additional fee is required.

☒ The fee has been calculated as shown below:

	RATE Non-Small Entity	RATE Small-Entity	FEE
<input type="checkbox"/> EXTENSION FEE			
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$
THIRD MONTH AFTER TIME PERIOD SET	1,020.00	510.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,590.00	795.00	\$

☐ TOTAL EXTENSION FEE \$ 0.00

☒ FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1	Column 2	Column 3			
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	44	MINUS **46	* = 0	x 50	x 25	\$
INDEPENDENT	10	MINUS ***5	* = 5	x 200	x 100	\$ 1,000
First presentation of multiple dependent claim				+ 360	+ 180	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 1,000.00

- \* If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.  
 \*\* If the number of Total Claims previously paid for is less than 20, write "20" in this space.  
 \*\*\* If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

01M0001/US/2

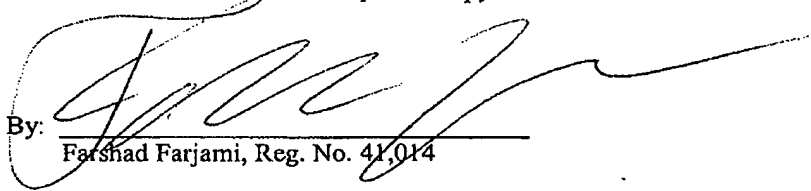
Attorney Docket No.: 01CON237P

- ☐ Enclosed is the total fee of \$ \_\_\_\_\_ (Payment by Credit Card, Form PTO-2038 Enclosed).
- ☒ Please charge Deposit Account No. 50-1867 in the amount of \$ 1,000.00
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-1867. A duplicate copy of this sheet is enclosed.

Date:

8/5/05

By:

  
Farshad Farjami, Reg. No. 41,014CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being filed by facsimile transmission to United States Patent and Trademark Office at facsimile number 571-273-8300 on the date stated below. The facsimile transmission report indicated that the facsimile transmission was successful.

Date

8/5/05

Signature

Christina CarterChristina Carter

Name of Person Performing Facsimile Transmission

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Application Serial No.: 09/965,745  
Attorney Docket No.: 01CON237P

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of: **Ryan, et al.**

Serial No.: 09/965,745

Filed: September 28, 2001

For: **System And Method For Connecting  
Communication Devices Over Packet  
Networks**

Art Unit: 2666

Examiner: Ton, Dang T.

**AMENDMENT AND RESPONSE TO NON-FINAL OFFICE ACTION**

Honorable Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir/Madam:

This Amendment and Response is in response to the *Non-Final* Office Action, dated July 11, 2005, in the above-referenced patent application. Please enter and consider the following amendments and remarks.

08/09/2005 SDIRETA1 00000039 501867 09965745

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